ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		2/3	5/18/01
FORMALITY REVIEW	98	1020	06/19/0
RESPONSE FORMALITY REVIEW	H-S	86	10-25-01

INDEX OF CLAIMS

✓ .... Rejected   N .... Non-elected
= .... Allowed   I .... Interference
− (Through numeral)... Canceled   A .... Appeal
÷ .... Restricted   O .... Objected

Claim Final	Original	Date						Claim Final	Original	Date						Claim Final	Original	Date					
1	✓							51								101							
2	✓							52								102							
3	✓							53								103							
4	✓	✓						54								104							
5	✓	✓						55								105							
6	✓	✓						56								106							
7	✓	✓						57								107							
8	✓	✓						58								108							
9	O	O						59								109							
10	O							60								110							
11	O	✓						61								111							
12	✓	✓						62								112							
13	✓	✓						63								113							
14	✓	✓						64								114							
15	✓	✓						65								115							
16	✓	✓						66								116							
17	O	O						67								117							
18	O	O						68								118							
19	✓	✓						69								119							
20	O	✓						70								120							
21	✓	✓						71								121							
22	O	O						72								122							
23	O	O						73								123							
24								74								124							
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47								97								147							
48								98								148							
49								99								149							
50								100								150							

If more than 150 claims or 10 actions
staple additional sheet here

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